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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Application of:

Denise BARBUT

Serial No.: 10/612,359

Filed: July 1, 2003

For: AORTIC SHUNT FOR SELECTIVE  
CEREBRAL PERFUSION IN STROKE  
AND CARDIAC ARREST

Group Art Unit: 3744

Examiner: Harry B. Tanner

AMENDMENT TRANSMITTAL

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for the above-identified application.

- ☐ Applicant(s) petitions for an extension of time under 37 CFR § 1.136 [fees: 37 CFR § 1.17(a)(1)-(5)] for the total number of months checked below:

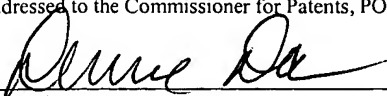
EXTENSION (months)		FEE FOR SMALL ENTITY		FEE FOR OTHER THAN SMALL ENTITY
1 month	<input type="checkbox"/>	\$55.00	<input type="checkbox"/>	\$110.00
2 months	<input type="checkbox"/>	\$215.00	<input type="checkbox"/>	\$430.00
3 months	<input type="checkbox"/>	\$490.00	<input type="checkbox"/>	\$980.00
4 months	<input type="checkbox"/>	\$765.00	<input type="checkbox"/>	\$1,530.00
5 months	<input type="checkbox"/>	\$1,040.00	<input type="checkbox"/>	\$2,080.00

- ☐ An extension for \_\_\_\_\_ months has already been secured and the fee paid therefor of \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.
- ☐ Extension fee due with this Request \_\_\_\_\_.
- ☒ If an additional extension of time is required, please consider this a petition therefor.

CERTIFICATE OF MAILING (37 C.F.R. §1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Commissioner for Patents, PO Box 1450 Alexandria, VA 22313-1450.

October 8, 2004  
Date of Deposit

  
Denise N. Doss

**FEES FOR CLAIMS:**

- ☒ Applicant claims small entity status pursuant to 37 CFR 1.27.

The fees for claims (37 CFR § 1.16(b)-(d)) have been calculated as shown below:

Total Claims	20	-	20	=	x	\$18.00	0
Independent Claims	2	-	3	=	x	\$88.00	0
Multiple Dependent Claims	\$300	(if applicable)				<input type="checkbox"/>	0
<b>TOTAL OF ABOVE CALCULATIONS</b>							0
Reduction by ½ for Filing by Small Entity. Note 37 CFR §§ 1.9, 1.27, 1.28.							0
<b>TOTAL FEES FOR CLAIMS SUBMITTED HEREWITH</b>							0

- ☐ A check in the amount of \_\_\_\_\_ is enclosed to cover the above fee(s).
- ☐ Charge O'Melveny & Myers' Deposit Account No. **50-2862** in the amount of \_\_\_\_\_.
- ☒ The Commissioner is authorized to charge O'Melveny & Myers' Deposit Account No. **50-2862** for any fees required under 37 CFR §§ 1.16 and 1.17 that are not covered, in whole or in part, by a check enclosed herewith and to credit any overpayments to said Deposit Account **50-2862**.

Respectfully submitted,  
O'MELVENY & MYERS LLP

Dated: 10/8/04

By: Diane K. Wong  
Diane K. Wong  
Reg. No. 54,550  
Attorneys for Applicants

JCK/DKW/cp

O'Melveny & Myers LLP  
114 Pacifica, Suite 100  
Irvine, CA 92618-3315  
(949) 737-2900



Patent US 233C1  
Attorney Docket: 161,700-052

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**AMENDMENT AND RESPONSE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action mailed August 19, 2004. Please amend the subject application as follows.

**Amendments to the Claims** begin on page 2 of this paper.

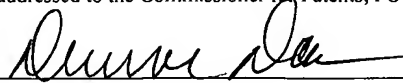
**Remarks** begin on page 7 of this paper.

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